



OWNER'S AFFIDAVIT
SHORT TERM RENTAL – REGISTRATION AND ADMINISTRATIVE APPROVAL

Address of Proposed Short Term Rental _____

Number of STR Units: _____ Number of Bedrooms: _____ Owner-Occupied? _____

COMMONWEALTH OF MASSACHUSETTS)

COUNTY OF _____).

The undersigned hereby states that they are the owner(s) of the property as listed above and that the persons identified herein are duly authorized as either the owner(s) or agent(s) of said property for the purposes of this application to operate a Short Term Rental as defined by Title V, Article 18 of the Town By-laws, Chapter 337 of the Acts of 2018 and M.G.L. sec. 64G, and that any representations made herein may be relied upon by the Town of Arlington as true to the best of your knowledge.

(Corporate Seal**)

Signature of Property Owner(s)

Typed or Printed Name

ATTEST:

Title

Corporate Secretary
(If No Seal)

Name of Company or Organization
(If Applicable)

Subscribed and sworn to before me a notary public on this _____ day of _____, 20____,

Notary Public

My Commission expires: _____

* NOTE: Designated agent must be an individual, not a company or firm.

** If Corporate Seal not available, must have signature of bot the Corporate President and Corporate Secretary.



TOWN OF ARLINGTON

Permit Number: _____

Date of Expiration: _____

Short Term Rental (“STR”) Registration & Renewal Form

Property Address: _____

Owner Name (and address if different): _____

Agent Name and Address: _____

Number of STR Units: _____ **Number of Bedrooms:** _____ **Owner-Occupied?** _____

How to use this form:

1. By signing of this form, you are affirming that you are in compliance with all the requirements of Title V Article 18 of the Arlington Town By-laws and all its subparts, including specific provisions outlined herein, and that you will abide by the stated requirements. Violation of any of the requirements set forth herein or in the Town By-laws may serve as grounds for revocation or suspension of the permit, and will require cessation of STR operations.
2. Any requirement with a blank (appears as “____”) must be completed by the owner and/or host/agent.
3. By completing and submitting this form for *registration renewal* you are acknowledging that all the information provided with your initial registration application remains the same. If any information has changed (including but not limited to type of STR, host, etc.), you must reapply for registration and may not renew.

Owner Host
Initials Initials

		1. I affirm that the STR is/will not be located within an Accessory Dwelling Unit or a unit designated as affordable, income-restricted, or otherwise subject to housing or rental assistance.
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		2. I affirm that no STR unit will be rented to any occupant for a period of more than thirty (31) consecutive days.
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		3. I affirm that the residential units identified in this application and owner's affidavit have not been the subject of 3 or more violations of the STR Town By-law, or any Town By-law, regulation or state law or code relating to excessive noise, improper disposal of trash, disorderly conduct, or other similar conduct within a six-months of this application for registration or renewal.
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		<p>4. <i>Only applicable for Owner-Occupied STRs</i></p> <ul style="list-style-type: none">• I affirm I will not offer STR units or bedroom to more persons or parties than there is capacity including the owners and their family while the owner is in residence.• I affirm that the owner-occupied dwelling unit is occupied by the owner at least 270 days out of the year.
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		<p>5. <i>Only applicable for Non-Owner STRs</i></p> <ul style="list-style-type: none">• I affirm I will not rent to more than one party per STR unit during any given period;
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		6. I affirm that the STR has not been/will not be rented or offered for use as reception space, party space, meeting space, or for any other similar events open to non-resident guests.
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		7. I affirm that I have not/will not offer food service to guests.
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		8. If granted, I will print and will continually display the STR permit in the interior of the unit at a location visible to guests.
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		9. I affirm that I have been/will maintain the property such that there is no exterior evidence (including but not limited to signage) that the property is being used as a STR.
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		<p>10. <i>Complete all that apply by providing a direct link to your STR listing. If you do not advertise on one of three provided platforms, leave blank.</i></p> <p>I advertise on the following platforms:</p> <p>Airbnb Link: _____</p> <p>Homeaway Link: _____</p> <p>VRBO Link: _____</p>
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		Others (Note: provide platform name and link)
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		11. Proof of a current insurance liability policy of at least \$1,000,000 for the STR dwelling unit/s is attached (or proof of equal or greater insurance through STR platforms such as VRBO or Airbnb); and I affirm that for as long as the unit is being used as a STR, such insurance shall be maintained in compliance with Chapter 337 of the Acts of 2018.
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		12. <i>Complete the following only if the owner of the dwelling unit in which the STR is proposed/exists is an LLC.</i>
As required of Massachusetts General Law [] I have filed an affidavit with the Town Clerk providing the name and street address of at least one natural person who has Management control and responsibility for the real property owned and leased or rented by the LLC. These persons names and street addresses are provided below;		
Name: _____		
Address: _____		
Name: _____		
Address: _____		
I also affirm that I have filed a copy of this affidavit with the clerks office as required by Massachusetts General Laws and have uploaded corporate records for the LLC.		

		13. I affirm that I will follow all applicable federal, state, and local laws, including but not limited to collection and certification of payment of taxes and procurement of any additional required licenses and permits.
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		14. I affirm that will follow all applicable provisions of the Towns By-laws, and by submitting this form I certify that the property is in compliance with all property maintenance, building, electrical, mechanical, and plumbing codes. (Sec.....).
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		15. I affirm that I will post in each unit, contact information for the owner, host, and/or other local emergency contact information.
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		16. <i>Only applicable if the STR is located in a multi-family structure containing three or more separate dwelling units. If not applicable leave blank.</i>
I affirm that I will post a map depicting all (minimum of two) evacuation routes by door for use in the event of an emergency. I will post the map immediately adjacent to every required egress door (except for those which lead directly to the outside of the building at grade level).		

		17. I affirm that I will install and maintain smoke and carbon dioxide detectors in locations as specified for dwelling units by the Building Code.
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		18. I affirm that I will place a working fire extinguisher and a working battery powered portable flashlight or lantern or other emergency lighting device that is workable during an electrical power outage in each STR.
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		19. I affirm that I will maintain records of each STR and make those records available for review upon request to the Town of Arlington and its subdivisions.
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		20. I affirm that to the best of my knowledge the STR is in compliance with each of the following, and that I will allow inspection of STR units by the Town for compliance with same: <ul style="list-style-type: none">• The State Sanitary Code;• Food Safe certification (if serving meals);• The Arlington Health Code;• Fire and carbon monoxide alarm requirements;• Fire escape route requirements;• The Building Code, including holding a valid certificate of occupancy; and• The Arlington Zoning Bylaw
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I hereby acknowledge that I comply with, and will continue to comply with, all of the requirements of Title V, Article 18 of the Town By-Laws, including specific provisions cited above which I have initialed, as well as all other federal, state, and local requirements to operate a STR in the Town of Arlington Massachusetts. I understand that a violation of any of the requirements is grounds for revocation or suspension of the permit and will require immediate cessation of operations.

Property Owner Signature

Business Entity Type:

(Massachusetts Corporation
(-) Limited Liability Company
(-) Foreign Corporation
(Fictitious Name Registration

(Sole Proprietor
(Partnership
(Joint Venture

(Affix Corporate Seal)

Business Entity

I hereby certify that I have the authority to execute this document on behalf of the business entity

Business Entity: _____

By: _____

Title: _____

Date: _____

Signature: _____

Host Signature

Business Entity Type:

(Massachusetts Corporation
(-) Limited Liability Company
(-) Foreign Corporation
(Fictitious Name Registration

(Sole Proprietor
(Partnership
(Joint Venture

(Affix Corporate Seal)

Business Entity

I hereby certify that I have the authority to execute this document on behalf of the business entity

Business Entity: _____

By: _____

Title: _____

Date: _____

Signature: _____

OFFICE USE ONLY

Approved By: _____

Date: _____

Select Board Office Notes and Conditions: _____

